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Infections Do Not Recognize International Borders: The Potential Impact of US Withdrawal From WHO

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The US withdrawal from WHO jeopardizes infection prevention, research funding, and global collaboration, disproportionately impacting low-income nations reliant on WHO support for equitable health care advancements.

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WHO Responds from Switzerland

"The World Health Organization regrets the announcement that the United States of America intends to withdraw from the Organization," the press release began.

The US "was a WHO founding member in 1948 and has participated in shaping and governing WHO's work ever since, alongside 193 other Member States.... Together, we ended smallpox, and together, we have brought polio to the brink of eradication. American institutions have contributed to and benefited from membership in WHO."

The press release concluded, "We hope the US will reconsider, and we look forward to engaging in constructive dialogue to maintain the partnership between the USA and WHO for the benefit of the health and wellbeing of millions of people around the world."

Loss of Global Guidance and Coordination

One of the primary concerns about the withdrawal is the loss of WHO-led IPC guidelines and recommendations. WHO continuously updates protocols for health care settings based on the latest scientific evidence and emerging infectious diseases. Without access to this centralized expertise, US health care institutions may face inconsistencies in IPC policies, potentially affecting patient safety and the ability to combat health care-associated infections (HAIs).

Without WHO coordination, information sharing between the US and other nations could also be hindered. This could slow down the ability to detect and respond to global outbreaks, delaying critical interventions in IPC measures.

Impact on Health Care Workers

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A lack of WHO-supported programs could result in gaps in education and preparedness, leaving health care workers more vulnerable to outbreaks of antimicrobial-resistant (AMR) infections and emerging pathogens. Without standardized WHO training materials, health care institutions may struggle to maintain best practices, leading to protocol inconsistencies. This could increase the likelihood of inadequate response measures in case of an outbreak, placing both health care workers and patients at greater risk. Furthermore, the absence of WHO-backed simulations and preparedness drills could leave staff underprepared for handling complex infection control scenarios.

Additionally, health care institutions often rely on WHO-approved personal protective equipment (PPE) standards. Without WHO collaboration, disparities in the availability and quality of PPE may exist, potentially increasing risks for health care personnel.

Challenges for Public Health Infrastructure

The withdrawal from WHO may also weaken federal and state-level infection control efforts. Many national programs, including the CDC IPC initiatives, rely on WHO data, frameworks, and partnerships. Reduced collaboration could impede surveillance efforts, making it harder to track infection rates and develop effective control measures.

Furthermore, hospitals and public health agencies that previously followed WHO protocols may face uncertainty about which alternative guidelines to adopt. This could lead to fragmentation in IPC policies, creating inconsistencies in hospital preparedness and response.

Funding and Research Implications

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global health initiatives and benefit from more substantial research capabilities, leaving resource-limited countries more reliant on WHO support. Low-income nations face significant barriers to advancing their IPC measures without equitable funding, including adopting cutting-edge diagnostic tools and technologies.

By withdrawing, the US reduces overall funding and disrupts the global balance, potentially leaving vulnerable regions even further behind in tackling infectious diseases. The WHO's ability to bridge these gaps is essential for global health equity, and losing a major contributor like the US could exacerbate existing inequalities in health care outcomes and preparedness.

Reactions from IPC Health Care Workers

"While this is not a surprise, it is truly frightening, not only for the US but the entire world," one nurse infection preventionist wrote on LinkedIn. "Deeply troubling," "devastating," and "disheartening" were some of the other comments written about the withdrawal

"The decision of the USA to withdraw from the WHO sends a disheartening message that undermines the credibility of global health governance," a pharmacy manager wrote. "This move risks shaking public confidence in the WHO's ability to unite nations and address critical health challenges. Such actions could have profound implications on how ordinary people view global health cooperation and solidarity."

In a positive spin, a writer who works for the WHO in Switzerland wrote, "As imperfect as the WHO may be, its achievements are both factual and undeniable. Now, we face a crisis —a difficult but pivotal transition. This is an auspicious moment to accelerate WHO reforms and diversify its funding sources, safeguarding WHO from becoming collateral

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new challenges in managing infectious disease threats. Maintaining strong international collaborations and ensuring health care workers have access to the best IPC practices will be critical in mitigating the impact of this withdrawal.

Please stay tuned, as this is an ongoing story.

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By Tori Whitacre Martonicz

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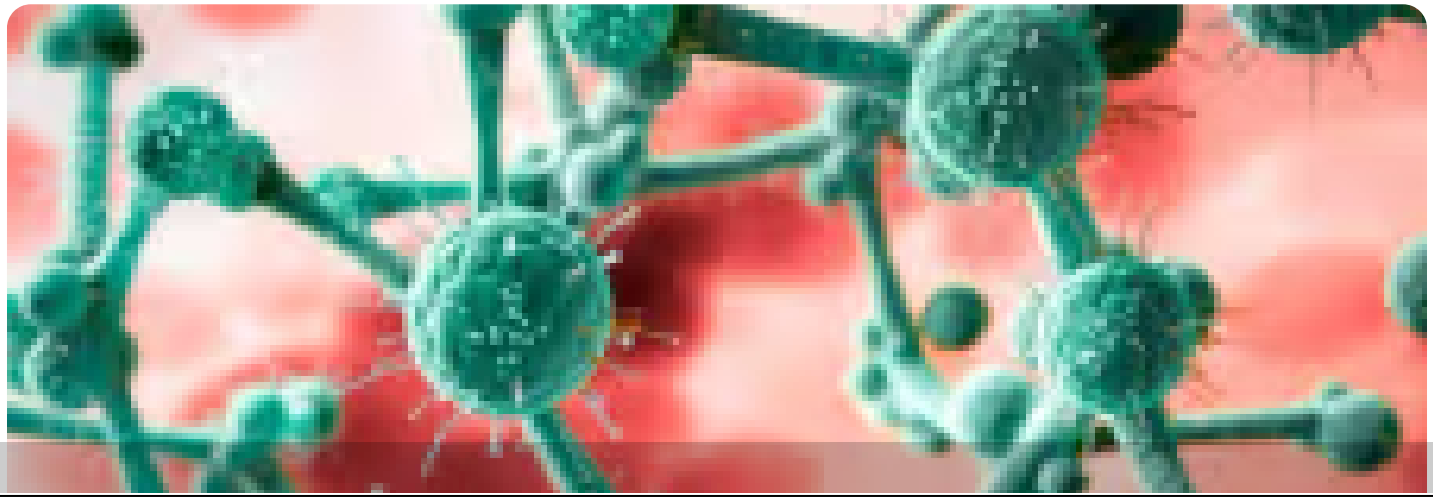

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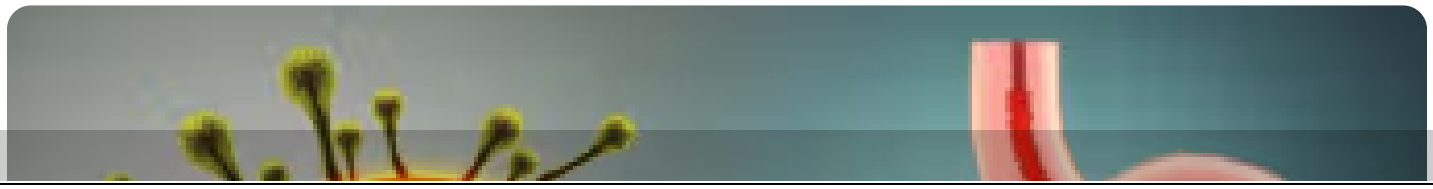

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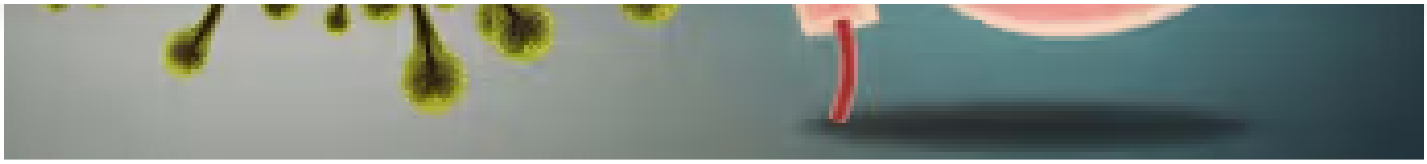

FDA Clears Rapid Multiplex GI Test That Could Transform Outbreak Detection and Infection Prevention

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